Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MISSOURI	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your	Charles First name  W. Middle name  Benjamin  Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.		
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4327	

Debtor 1 Charles W. Benjamin

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	1701 Votorone Memorial Plant Let 14	If Debtor 2 lives at a different address:
		1701 Veterans Memorial Pkwy, Lot 14 Saint Charles, MO 63303 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Saint Charles	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Charles W. Benjamin

Case number (if known)

	t 2: Tell the Court About	i oui b	anki upicy oc				
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Required by 1</i> of page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bank box.	kruptcy
	choosing to file under	■ C	hapter 7				
		□ с	hapter 11				
		□ с	hapter 12				
		□ с	hapter 13				
			·				
8.	How you will pay the fee		about how yo	u may pay. Ty <mark>ր</mark> attorney is sub	pically, if you are paying the fee you	with the clerk's office in your local court for mourself, you may pay with cash, cashier's check, If, your attorney may pay with a credit card or continuous	or money
					stallments. If you choose this option ts (Official Form 103A).	n, sign and attach the Application for Individual	s to Pay
			I request tha	t my fee be wa	aived (You may request this option	only if you are filing for Chapter 7. By law, a ju	
			applies to you	ır family size aı	nd you are unable to pay the fee in	r income is less than 150% of the official pover installments). If you choose this option, you multiple form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye					
			District			Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No	)				
	cases pending or being filed by a spouse who is	☐ Ye	ıs.				
	not filling this case with you, or by a business partner, or by an affiliate?		o.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No	Go to I	ne 12.			
	residence?	■ Ye	es. Has yo	ur landlord obta	ained an eviction judgment against	you?	
				No. Go to line	12.		

Debtor 1 Charles W. Benjamin Pg 4 of 50 Case number (if known)

Part	Report About Any Bu	sinesses	You Owr	n as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code				
	it to this petition.		Chec	k the appropriate box to describe your business:				
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir s, cash-fl	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).				
	For a definition of small	■ No.	I am r	not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Part	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is							
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?				
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
	- ·			Number, Street, City, State & Zip Code				

Debtor 1 Charles W. Benjamin

Pg 5 of 50 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Charles W. Benjamin Pg 6 of 50 Case number (if known)

Part	6: Answer These Questi	ons for Rep	porting Purposes		
16.	What kind of debts do you have?	i		consumer debts? Consumer debts are ersonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			Yes. Go to line 17.		
		16b.	Are your debts primarily	<b>business debts?</b> Business debts are divestment or through the operation of the	
		I	☐ No. Go to line 16c.		
		1	☐ Yes. Go to line 17.		
		16c.	State the type of debts you	u owe that are not consumer debts or bu	siness debts
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapt	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	<b>—</b> 103.		<ol> <li>Do you estimate that after any exempt available to distribute to unsecured cred</li> </ol>	property is excluded and administrative expenses itors?
	be available for distribution to unsecured creditors?	1	□ Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,00	0,000 I - \$100,000 D1 - \$500,000 D1 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Part	7: Sign Below				
For	you	I have exa	mined this petition, and I d	declare under penalty of perjury that the i	nformation provided is true and correct.
				r 7, I am aware that I may proceed, if elige relief available under each chapter, and	gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.
				d not pay or agree to pay someone who the notice required by 11 U.S.C. § 342(b	
		I request re	elief in accordance with the	e chapter of title 11, United States Code,	, specified in this petition.
		bankruptcy and 3571.	case can result in fines u		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			es W. Benjamin W. Benjamin of Debtor 1	Signature of D	Pebtor 2
		Executed	July 29, 2019 MM / DD / YYYY	Executed on	MM / DD / YYYY

Debtor 1 Charles W. Benjamin

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brent S	S. Westbrook	Date	July 29, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Brent S. W	Vestbrook 59400 MO		
	k Law Group LLC		
Firm name			
515 Jeffer	son St.		
Suite C			
Saint Cha	rles, MO 63301		
Number, Street,	City, State & ZIP Code		
Contact phone	636-493-9231	Email address	brent@westbrooklawgroup.com
59400 MO	MO		
Bar number & S	tato		

mation to identify your	case:	1 g 0 01 30		
Charles W. Benja	min			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	EASTERN DISTRICT C	OF MISSOURI		
				☐ Check if this is an
				amended filing
	Charles W. Benja First Name	First Name Middle Name	Charles W. Benjamin       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name	Charles W. Benjamin First Name Middle Name Last Name  First Name Middle Name Last Name

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,316.38
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,316.38
Par	12: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	17,056.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,032.20
	Your total liabilities	\$	46,088.20
Par	3: Summarize Your Income and Expenses		,
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,877.16
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,904.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Cha<u>rles W. Benjamin</u>
Pg 9 of 50
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\_\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	12,337.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	12,337.00

		Entered 07/29/19 18	TOLES MICHIEL	Document
Fill in this information to identify your case ar		J-01-50		
Debtor 1 Charles W. Benjamin				
	Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
	ERN DISTRICT OF MISSO			
United States Bankruptcy Court for the: EASTE	LICIT DISTRICT OF WILLSO	501(1		
Case number		_		☐ Check if this is an
				amended filing
O((; ; ) = 400 A /D				
Official Form 106A/B				
Schedule A/B: Property	1			12/15
In each category, separately list and describe items. Ithink it fits best. Be as complete and accurate as position in formation. If more space is needed, attach a separa Answer every question.	ssible. If two married peopl ite sheet to this form. On th	e are filing together, both are equ e top of any additional pages, wr	ally responsible for su	oplying correct
Part 1: Describe Each Residence, Building, Land, o				
Do you own or have any legal or equitable interes	t in any residence, building	, land, or similar property?		
■ No. Go to Part 2.				
☐ Yes. Where is the property?				
Part 2: Describe Your Vehicles				
or 10006. VI 11076 ICUAI VI CUUILAVIC I.	nterest in anv vehicles.	whether they are registered of	r not? Include any ve	hicles you own that
someone else drives. If you lease a vehicle, also r	report it on Schedule G: E	whether they are registered of executory Contracts and Unexp		hicles you own that
someone else drives. If you lease a vehicle, also r  3. Cars, vans, trucks, tractors, sport utility veh	report it on Schedule G: E	e property? Check one		tims or exemptions. Put
Someone else drives. If you lease a vehicle, also response one else drives. If you lease a vehicle, also response on the second of the second	who has an interest in the	e property? Check one	red Leases.	nims or exemptions. Put d claims on <i>Schedule D:</i>
Someone else drives. If you lease a vehicle, also response one else drives. If you lease a vehicle, also response on the second of the second	who has an interest in the Debtor 1 only	e property? Check one	on not deduct secured claime amount of any secured Creditors Who Have Claim	nims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .  Current value of the
Someone else drives. If you lease a vehicle, also response one else drives. If you lease a vehicle, also response one else drives. If you lease a vehicle, also response on the second of the second o	who has an interest in the	te property? Check one	on not deduct secured clain amount of any secured Creditors Who Have Clain.	nims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .
Someone else drives. If you lease a vehicle, also responses a vehicle,	who has an interest in the Debtor 1 only Debtor 1 and Debtor 2	the property? Check one to construct and Unexpert to construct and une	on not deduct secured claime amount of any secured Creditors Who Have Claim	nims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .  Current value of the
Someone else drives. If you lease a vehicle, also responses a vehicle,	who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debte (see instructions)	e property? Check one  conly ors and another unity property  cles, other vehicles, and accommobiles, motorcycle access	oo not deduct secured claine amount of any secured Creditors Who Have Clain Current value of the Intire property?  \$6,400.00  essories ories	nims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Charles W. Benjamin	Pg 11 0f 50	Case number (if known)
6.	Exampl	old goods and furnishings es: Major appliances, furniture, line	ns, china, kitchenware	
	□ No ■ Yes.	Describe		
		sough hooks	and deals 2 about 1 able 2 lamme diving	room toblo
		silverware, be dryer, stove,	ease, desk, 2 chairs, table, 3 lamps, dining ed, bedroom lamp, microwave, refrigerator dishes, cookware, air conditioner, lawn m nousehold goods	r, washer &
7.	Electror Exampl			inters, scanners; music collections; electronic devices
	_	Describe		
		radio 2 tolovi	sions, stereo, VCR/DVD player	\$185.00
		radio, 2 televi	Sions, stereo, volvovo piayer	
8.		bles of value es: Antiques and figurines; painting other collections, memorabilia,		r art objects; stamp, coin, or baseball card collections;
		Describe		
9.		ent for sports and hobbies es: Sports, photographic, exercise, musical instruments	and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10	_ `	<b>ns</b> <i>oles:</i> Pistols, rifles, shotguns, ammu	unition, and related equipment	
	■ No □ Yes.	Describe		
11	□ No	oles: Everyday clothes, furs, leather	r coats, designer wear, shoes, accessories	
	■ Yes.	Describe		
		regular clothe	es, shoes, jackets	\$60.00
12	□ No		velry, engagement rings, wedding rings, heirloom jo	ewelry, watches, gems, gold, silver
		watch, rings,	bracelet	\$50.00
13		rm animals oles: Dogs, cats, birds, horses		
		Describe		
		Cat		\$0.00
_				
14	. <b>Any ot</b> □ No	her personal and household item	ns you did not already list, including any health	aids you did not list

Yes. Give specific information..... Official Form 106A/B

Pg 12 of 50 Charles W. Benjamin Case number (if known) Debtor 1 \$2,000.00 1973 Single Wide Mobile Home; 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,915.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes. Cash \$1.38 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Financial Account PayPal** \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Π Nο Institution name or individual: Yes. ..... Marquette Mobile Village - Landlord Security \$0.00 Deposit \$600

Official Form 106A/B Schedule A/B: Property page 3

Pg 13 of 50 Case number (if known) Debtor 1 Charles W. Benjamin 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation. Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information...

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

Debtor	Charles W. Benjamin		Case number (if known)	
34. <b>Oth</b>	er contingent and unliquidated claims of ever	y nature, including counterclaims	of the debtor and rights to set off o	laims
■ N	0			
☐ Y	es. Describe each claim			
35. <b>Any</b>	financial assets you did not already list			
■ N	0			
☐ Y	es. Give specific information			
00 4		And A to abotton and antition for any		
	ld the dollar value of all of your entries from F r Part 4. Write that number here			\$1.38
Part 5:	Describe Any Business-Related Property You Own	or Have an Interest In. List any real esta	ate in Part 1.	
_ `	ou own or have any legal or equitable interest in an	business-related property?		
■ No	. Go to Part 6.			
☐ Yes	s. Go to line 38.			
Part 6:	<b>Describe Any Farm- and Commercial Fishing-Relat</b> If you own or have an interest in farmland, list it in Part		st In.	
46 <b>Da</b>		at in any form ar commercial fichir	an valetad nuanautus?	
	you own or have any legal or equitable interes	st in any farm- or commercial fishir	ig-related property?	
_	No. Go to Part 7.			
Ц	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Inte	erest in That You Did Not List Above		
	you have other property of any kind you did n amples: Season tickets, country club membership			
■ N	0			
□ Y	es. Give specific information			
54 <b>A</b> c	ld the dollar value of all of your entries from F	Part 7 Write that number here		\$0.00
0+. At	a the deliar value of all of your entires from t	art 7. Write that hamber here		φυ.υυ_
Part 8:	List the Totals of Each Part of this Form			
55. <b>P</b> a	rt 1: Total real estate, line 2			\$0.00
	rrt 2: Total vehicles, line 5	\$6,400.00		Ψ0.00
57. <b>Pa</b>	rt 3: Total personal and household items, line	· · · · · · · · · · · · · · · · · · ·		
58. <b>Pa</b>	rt 4: Total financial assets, line 36	\$1.38		
59. <b>Pa</b>	rt 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b>	rt 6: Total farm- and fishing-related property,			
61. <b>P</b> a	rt 7: Total other property not listed, line 54	+ \$0.00		
62. <b>T</b> o	tal personal property. Add lines 56 through 61.	\$9,316.38	Copy personal property total	\$9,316.38
63. <b>T</b> o	stal of all property on Schedule A/B. Add line 5	5 + line 62		\$9,316.38

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:							
Debtor 1	Charles W. Benja	min					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF MISSOURI				
Case number	Case number						
(if known)					☐ Check if this is an		
					amended filing		

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.					
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)				
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own					
		Copy the value from	Check only one box for each exemption.			

Schedule A/B that lists this property	portion you own			
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2013 Ford Fusion 79,XXX miles Line from Schedule A/B: 3.1	\$6,400.00		\$0.00	RSMo § 513.430.1(5)
Line Holli Schedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit	
couch, bookcase, desk, 2 chairs, table, 3 lamps, dining room table,	\$620.00		\$620.00	RSMo § 513.430.1(1)
silverware, bed, bedroom lamp, microwave, refrigerator, washer & dryer, stove, dishes, cookware, air conditioner, lawn mower, misc books, CDs, household goods Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
radio, 2 televisions, stereo, VCR/DVD player	\$185.00		\$185.00	RSMo § 513.430.1(1)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
regular clothes, shoes, jackets	\$60.00		\$60.00	RSMo § 513.430.1(1)
Line nom Schedule PVD. 11.1			100% of fair market value, up to	

any applicable statutory limit

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	and the Dongamin				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	watch, rings, bracelet Line from Schedule A/B: 12.1	\$50.00		\$50.00  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(2)
	Cat Line from Schedule A/B: 13.1	\$0.00		\$0.00  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)
	1973 Single Wide Mobile Home; Line from Schedule A/B: 14.1	\$2,000.00	■	\$2,000.00  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(6)
	Cash Line from Schedule A/B: 16.1	\$1.38		\$1.38  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)
	Financial Account: PayPal Line from Schedule A/B: 17.1	\$0.00		\$0.00  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)
	Marquette Mobile Village - Landlord Security Deposit \$600 Line from Schedule A/B: 22.1	\$0.00		\$0.00  100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(3)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	3 years after that for ca	ases fi	,	,

Fill in this information to identify your case:  Debtor 1  Charles W. Benjamin  First Name  Middle Name  Last Name  United States Bankruptcy Court for the:  EASTERN DISTRICT OF MISSOURI  Case number  (if known)  Check if this is an amended filing					
Debtor 1  Charles W. Benjamin First Name Middle Name Last Name  Debtor 2 (Spouse if, filling) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI  Case number (if known)  Check if this is an					
First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI  Case number (if known) Check if this is an					
Debtor 2 (Spouse if, filing)  First Name  Middle Name  Last Name  United States Bankruptcy Court for the:  EASTERN DISTRICT OF MISSOURI  Case number (if known)  Check if this is an					
Case number   Cif known   Check if this is an   Check if this is					
Case number Check if this is an					
(if known) Check if this is an					
Official Form 106D					
Schedule D: Creditors Who Have Claims Secured by Property 12/15					
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).					
1. Do any creditors have claims secured by your property?					
□ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.					
Yes. Fill in all of the information below.					
Part 1: List All Secured Claims  Column A Column B Column C					
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.  Amount of claim  Do not deduct the value of collateral that supports this value of collateral.  If any					
2.1 Bridgecrest Describe the property that secures the claim: \$17,056.00 \$6,400.00 \$10,656.00					
Creditor's Name 2013 Ford Fusion 79,XXX miles					
7300 East Hampton					
Avenue  As of the date you file, the claim is: Check all that					
Suite 100 apply.  Mesa, AZ 85209 Contingent					
Mesa, AZ 85209					
Disputed					
Who owes the debt? Check one. Nature of lien. Check all that apply.					
■ Debtor 1 only □ An agreement you made (such as mortgage or secured					
Debtor 2 only					
☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit					
Check if this claim relates to a community debt  Other (including a right to offset)					

Add the dollar value of your entries in Column A on this page. Write that number here: \$17,056.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$17,056.00

Last 4 digits of account number

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Opened 12/18 Last Active

Date debt was incurred 6/30/19

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

9301

	Casc 13 44/10	DOC 1 11	Da	18 of 50	01723/13 10.40.13	Widin	Document
Fill in th	nis information to identi	fy your case:	Fg.	10 01 50			
Debtor 1	Charles W	. Beniamin					
	First Name		dle Name	Last Name			
Debtor 2 (Spouse if,		Mide	dle Name	Last Name			
(Spouse II,	filling) First Name	Wilde	de Name	Last Name			
United S	States Bankruptcy Court f	or the: EASTER	RN DISTRICT OF MIS	SSOURI			
Case nu	ımber						
(if known)							Check if this is an
						a	mended filing
Officia	al Form 106E/F						
	dule E/F: Credite	ore Who Ha	vo Uneocuro	d Claime			12/15
					Part 2 for creditors with NONP	DIODITY cla	
schedule schedule eft. Attac ame and	G: Executory Contracts and D: Creditors Who Have Clah the Continuation Page to Lase number (if known).	nd Unexpired Lease aims Secured by Pro this page. If you ha	s (Official Form 106G). operty. If more space is ave no information to r	Do not include s needed, copy	contracts on Schedule A/B: Property any creditors with partially see the Part you need, fill it out, not do not file that Part. On the top	cured claims umber the en	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIO						
_	ny creditors have priority u	insecured ciaims aç	jainst you?				
	o. Go to Part 2.						
☐ Y	es.						
Part 2:	List All of Your NON	PRIORITY Unsecu	red Claims				
3. Doa	ny creditors have nonprior	ity unsecured claim	s against you?				
ПΝ	o. You have nothing to report	rt in this part. Submit	this form to the court wit	th vour other sche	edules.		
_				,			
Y	es.						
unse	cured claim, list the creditor one creditor holds a particular	separately for each cl	laim. For each claim liste	ed, identify what t	b holds each claim. If a creditor type of claim it is. Do not list clair three nonpriority unsecured clair	ms already ind	cluded in Part 1. If more
							Total claim
4.1	Account Resolution	Corp	Last 4 digits of ac	count number	5904		\$102.00
	Nonpriority Creditor's Name		_		0 14040		
	Attn: Bankruptcy Po Box 3860		When was the de	bt incurred?	Opened 12/18		_
	Chesterfield, MO 630	06					
	Number Street City State Zip		As of the date you	u file, the claim	is: Check all that apply		
	Who incurred the debt? Ch	neck one.	_				
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor 2 or	nly	☐ Disputed				
$\square$ At least one of the debtors and another			Type of NONPRIC	ORITY unsecured	d claim:		
	Check if this claim is fo	r a community	Student loans			. ,	
	debt Is the claim subject to offs	et?	□ Obligations aris report as priority cl		ration agreement or divorce that	t you did not	
	■ No				g plans, and other similar debts		
	~		•		Attorney Radiologic Ima	aging	
	☐ Yes		Other. Specify	Consultant	S	-ລຊ	

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Debio	Charles W. Benjamin		Case number (if known)	
4.2	Account Resolution Corp	Last 4 digits of account number	1924	\$79.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 07/17	
	Po Box 3860 Chesterfield, MO 63006 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Consultant	Attorney Radiologic Imaging s	
4.3	BJC Healthcare	Last 4 digits of account number	7509	\$103.87
	Nonpriority Creditor's Name PO Box 958410 Saint Louis, MO 63195	When was the debt incurred?	2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify medical bil	<u> </u>	
4.4	BJC Healthcare	Last 4 digits of account number	7509	\$170.19
	Nonpriority Creditor's Name PO Box 958410 Saint Louis, MO 63195	When was the debt incurred?	2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify medical bil	I	

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Debtor	1 Charles W. Benjamin	Pg 20 01 50	Case number (if known)	
4.5	Busey Bank	Last 4 digits of account number	2224	\$408.80
	Nonpriority Creditor's Name 1928 Zumbehl Rd.	When was the debt incurred?	2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	э энгэн энг эррү	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify overdrawn	account	
4.6	Commerce Bank	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name	_		¥20000
	Credit Recovery Dispute Rep PO Box 419248 Mailstop: KCREC-10	When was the debt incurred?	2019	
	Kansas City, MO 64141			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify overdrawn	account	
4.7	Department of Education/Nelnet	Last 4 digits of account number	6029	\$6,884.00
	Nonpriority Creditor's Name			Ψ0,004.00
	Attn: Claims Po Box 82505	When was the debt incurred?	Opened 01/16 Last Active 6/30/19	
	Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	<u></u>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	radion agreement or divorce that you did flot	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	I	

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Debtor	1 Charles W. Benjamin	Py 21 01 50	Case number (if known)	
4.8	Department of Education/Nelnet	Last 4 digits of account number	5929	\$3,846.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 01/16 Last Active 6/30/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa		
4.9	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6227	\$1,607.00
	Attn: Claims Po Box 82505 Lincoln. NE 68501	When was the debt incurred?	Opened 07/16 Last Active 6/30/19	
	Number Street City State Zip Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	
4.1	Jefferson Capital Systems, LLC Nonpriority Creditor's Name	Last 4 digits of account number	4003	\$1,054.00
	Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred?	Opened 01/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	_ 110	Factoring C	Company Account Verizon	
	□Yes	Other. Specify Wireless		

Pg 22 of 50 Case number (if known) Debtor 1 Charles W. Benjamin 4.1 **Lincoln County Justice Center** \$4,664.00 Last 4 digits of account number Nonpriority Creditor's Name 45 Business Park Drive When was the debt incurred? 2009 Troy, MO 63379 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Incarceration charges ☐ Yes 4.1 Medicredit Inc. 8734 \$4,576.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? **Opened 11/18** Po Box 1629 Maryland Heights, MO 63043 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney St Joseph Hospital St ☐ Yes Other. Specify Char 4.1 Medicredit Inc. 8633 \$4,173.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? **Opened 11/18** Po Box 1629 Maryland Heights, MO 63043 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

Official Form 106 E/F

☐ Yes

Other. Specify Char

Collection Attorney St Joseph Hospital St

# Case 19-44710 Doc 1 Filed 07/29/19 Entered 07/29/19 18:48:19 Main Document Pg 23 of 50 Case number (if known)

Debtor	1 Charles W. Benjamin	Py 23 01 50 G	Case number (if known)	
4.1	Progressive Leasing	Last 4 digits of account number	3495	\$964.34
4	Nonpriority Creditor's Name 256 West Data Drive	When was the debt incurred?	10/19/2018	Ψ004.04
	Draper, UT 84020  Number Street City State Zip Code			
	Who incurred the debt? Check one.	As of the date you file, the claim is	ь. Спеск ан тыт арргу	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	■ Other. Specify charge acco	ount mattress firm	
4.1	Regions Bank	Look A digita of account number		\$200.00
5	Nonpriority Creditor's Name  1900 Fifth Avenue North	Last 4 digits of account number  When was the debt incurred?	2015-2016	Ψ200.00
	Birmingham, AL 35203  Number Street City State Zip Code	As of the date you file, the claim is		
	Who incurred the debt? Check one.	As of the date you me, the claim is	з. Опеск ан шатарру	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	claim:	
	Check if this claim is for a community			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims		
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify overdrawn a	account	-
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		
is tryi have	nis page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor in a at you listed in Parts 1 or 2, list the additi	Parts 1 or 2, then list the collection agency	y here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 did you I	ist the original creditor?	
	stem Inc. ox 64378	<u> </u>	Part 1: Creditors with Priority Unsecured Clai	
_	Paul, MN 55164	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Nama a	nd Address	On which entry in Part 1 or Part 2 did you I	ist the original creditor?	
	ess Firm	·	Part 1: Creditors with Priority Unsecured Clai	ms
	Veterans Memorial Pkwy		Part 2: Creditors with Nonpriority Unsecured	Claims
Saint	Charles, MO 63303	Last 4 digits of account number		
	nd Address logic Imaging Consultants	On which entry in Part 1 or Part 2 did you I Line <b>4.1</b> of ( <i>Check one</i> ):		
	ompass Point Dr.	` '	Part 1: Creditors with Priority Unsecured Clai Part 2: Creditors with Nonpriority Unsecured	
	Charles, MO 63301	Last 4 digits of account number	Part 2. Creditors with Nonphonty Onsecured	Ciairis
Name a	nd Address	On which entry in Part 1 or Part 2 did you I	ist the original creditor?	
Radio	logic Imaging Consultants	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clai	ms
	ompass Point Dr. Charles, MO 63301	•	Part 2: Creditors with Nonpriority Unsecured	Claims
Janit	Chanes, MC 00001	Last 4 digits of account number		

## Case 19-44710 Doc 1 Filed 07/29/19 Entered 07/29/19 18:48:19 Main Document Pg 24 of 50 Case number (# Issue)

Case number (if known) Debtor 1 Charles W. Benjamin On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address SSM Health St. Joseph Hospital Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 300 1st Capitol Dr. ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Charles, MO 63301 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address SSM Health St. Joseph Hospital Line 4.13 of (Check one):  $\square$  Part 1: Creditors with Priority Unsecured Claims 300 1st Capitol Dr. ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Charles, MO 63301 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Verizon Wireless Line **4.10** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 660108 ■ Part 2: Creditors with Nonpriority Unsecured Claims

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

Dallas, TX 75266

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total	6f.	Student loans	6f.	\$ Total Claim 12,337.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,695.20
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 29,032.20

Last 4 digits of account number

Fill in this infor	mation to identify your	case:		
Debtor 1	Charles W. Benja	min		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

			Pa 26 of 50		
Fill in this info	rmation to identify your				
Debtor 1	Charles W. Benja	min			
	First Name	Middle Name	Last Name		
Debtor 2	E: AN	N			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	orm 106H				
		abtava			
scheauie	H: Your Cod	eptors			12/15
■ No □ Yes  2. Within the Arizona, Ca ■ No. Go the Arizona in the	h <b>e last 8 years, have yo</b> u alifornia, Idaho, Louisiana o line 3.	Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Washi	<b>y?</b> (Community property	states and territories include
3. In Column in line 2 aç	1, list all of your codeb gain as a codebtor only	f that person is a guaran	spouse as a codebtor tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official
Form 106D out Colum		Form 106E/F), or Sched	ule G (Official Form 10	6G). Use Schedule D, S	Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and Z	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
Name				□ Schedule E, line □ Schedule E/F, lir	
				☐ Schedule G, line	
Numb	er Street			_	
City	<b>G</b>	State	ZIP Code		
				Па	
3.2 Name				Schedule D, line	
INGILIE				☐ Schedule E/F, lir☐ Schedule G, line	
				— Scriedule G, line	<u> </u>
Numb	er Street				

ZIP Code

Schedule H: Your Codebtors

State

City

Fill	in this information to identi	ify your cas	se:									
Del	otor 1 Char	rles W. B	enjamin			_						
1	otor 2 ouse, if filing)					_						
Uni	ted States Bankruptcy Cou	urt for the:	EASTERN DISTRICT	OF MISSOURI								
	se number nown)						□ A	k if this is: n amende suppleme	ed filing	ving post	petition chapt	ter
$\bigcirc$	fficial Form 100	NI.					13	3 income a	as of the	e followin	g date:	
	fficial Form 106	_					M	M / DD/ Y	YYY			
	chedule I: You as complete and accurate										-	2/15
spo atta	plying correct informatio use. If you are separated ch a separate sheet to the Describe Empl	and your is form. O	spouse is not filing wi	th you, do not includ	de infor	matio	on about	your spo	ouse. If	more sp	ace is neede	
1.	Fill in your employmen information.	t		Debtor 1				Debtor 2	or non	ı-filing s	pouse	
	If you have more than one job, attach a separate page with		Employment status	■ Employed				☐ Emplo	•			
	information about additional employers.			☐ Not employed				☐ Not e	mployed	d		
	Include part-time, seasor	nal or	Occupation	Parts Person								
	self-employed work.	riai, Oi	Employer's name	Harvester Small	Engin	е						
	Occupation may include or homemaker, if it applied		Employer's address	1430 Jungs Stat Saint Charles, M		03						
			How long employed th	nere? 3 month	าร			_				
Pai	t 2: Give Details Al	bout Mont	hly Income									
	mate monthly income as use unless you are separat		te you file this form. If y	you have nothing to re	eport for	any l	line, write	\$0 in the	space.	Include y	our non-filing	ı
	u or your non-filing spouse e space, attach a separate			ombine the information	n for all e	emplo	oyers for	that perso	on the	e lines be	elow. If you ne	ed
							For Deb	otor 1		Debtor 2 filing sp		
2.	List monthly gross wag deductions). If not paid				2.	\$	2,	340.00	\$		N/A	
3.	Estimate and list month	hly overtir	ne pay.		3.	+\$		0.00	+\$_		N/A	

Official Form 106I Schedule I: Your Income page 1

2,340.00

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Charles W. Benjamin	-	Case	number (if kno	wn)			
	0	and the same			Debtor 1		non-fi	ebtor 2 or iling spous	
	Cop	y line 4 here	4.	\$_	2,340.	00	\$	N,	<u>/A</u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	462.	84	\$	N	/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.	00	\$	N.	/A
	5c.	Voluntary contributions for retirement plans	5c.	\$		00	\$	N.	/A
	5d.	Required repayments of retirement fund loans	5d.	\$_		00	\$		<u>/A</u>
	5e.	Insurance	5e.	\$		00	\$		<u>/A</u>
	5f.	Domestic support obligations	5f.	\$_ \$		00	\$		<u>/A</u>
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.⊣	· · —		00	+ \$		<u>/A</u> /A
_			_	· —			· :		<u> </u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	462.		\$		<u>/A</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,877.	16	\$	N.	<u>/A</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0	00	\$	N.	/A
	8b.	Interest and dividends	8b.	\$-		00	\$		/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		00	\$		/A
	8d.	Unemployment compensation	8d.	\$		00	\$		/A
	8e.	Social Security	8e.	\$		00	\$	N.	/A
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	_ 8f. _ 8g.	\$ 	0.	00 00	\$ 	N	/ <u>A</u>
	8h.	Other monthly income. Specify:	8h.+	- \$	0.	00	+ \$	N.	<u>/A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.	00	\$	١	N/A
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		1,877.16	+ \$		N/A = \$	1,877.16
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			.,	-			
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	depen	•	•			hedule J. 11. +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12. \$	1,877.16
13.	Do y	you expect an increase or decrease within the year after you file this form	?						bined thly income
		No. Yes. Explain:							

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	otor 1 Charles W. Benjamin		Che	ck if this is:	
	otor 2 puse, if filing)		_	An amended filing A supplement show 13 expenses as of the	ving postpetition chapter
``			-		
Unit	led States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI			MM / DD / YYYY	
	e number nown)				
	fficial Form 106J				
	chedule J: Your Expenses			-11	12/15
info	as complete and accurate as possible. If two married people are fil ormation. If more space is needed, attach another sheet to this forn mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for</i>	Separate Household	d of Deb	tor 2.	
2.	Do you have dependents? ■ No				
		Dependent's relations Debtor 1 or Debtor 2	hip to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No
	uepenuents names.				☐ Yes ☐ No
	_			_	Yes
					□ No □ Yes
	_				□ No
_	_				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you appears as of a date after the bankruptcy is filed. If this is a supplemblicable date.				
the	lude expenses paid for with non-cash government assistance if you value of such assistance and have included it on Schedule I: Your ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Inclu-	de first mortgage	4. \$	8	300.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	6	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		200.00
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as home experiences.</li> </ul>	equity loans	4d. \$		0.00
			4		V:VV

Debto	Charles W. Benja	min	Case num	ber (if known)	
S. 1	Utilities:				
	Sa. Electricity, heat, natu	ıral gas	6a.	\$	145.00
	6b. Water, sewer, garba	•	6b.	· -	60.00
	_	ne, Internet, satellite, and cable services	6c.	·	75.00
	6d. Other. Specify:	ic, internet, satellite, and cable services	6d.		0.00
	Food and housekeeping	eunnlies	od. 7.	·	175.00
	Childcare and children's	• •	8.	\$	
			6. 9.	·	0.00
	Clothing, laundry, and dr	-		\$	0.00
	Personal care products a		10.	·	0.00
	Medical and dental exper		11.	\$	0.00
	<b>Fransportation.</b> Include ga Do not include car paymen	as, maintenance, bus or train fare.	12.	\$	75.00
	. ,			·	
		reation, newspapers, magazines, and boo		•	100.00
	Charitable contributions	and religious donations	14.	Φ	0.00
	nsurance.	advated from vour pour a last of all in Page 4	· 20		
		educted from your pay or included in lines 4 c		<b>c</b>	0.00
	15a. Life insurance		15a.	·	0.00
	15b. Health insurance		15b.	·	432.00
	15c. Vehicle insurance		15c.	·	342.00
	15d. Other insurance. Spe		15d.	\$	0.00
		s deducted from your pay or included in lines		_	
	Specify:		16.	\$	0.00
	nstallment or lease payn				
	17a. Car payments for Ve	hicle 1	17a.	\$	0.00
	<ol><li>17b. Car payments for Ve</li></ol>	hicle 2	17b.	\$	0.00
	17c. Other. Specify:		17c.	\$	0.00
	17d. Other. Specify:		17d.	\$	0.00
	· · · · · · · · · · · · · · · · · · ·	y, maintenance, and support that you did i	not report as	-	
		on line 5, Schedule I, Your Income (Official		\$	0.00
		e to support others who do not live with ye		\$	0.00
	Specify:		19.		
).	Other real property expen	nses not included in lines 4 or 5 of this for	m or on Schedule I: Yo	our Income.	
	20a. Mortgages on other		20a.		0.00
	20b. Real estate taxes		20b.	\$	0.00
	20c. Property, homeowne	er's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair,		20d.	·	0.00
		iation or condominium dues	20e.		0.00
		lation of condominatinates		·	
. '	Other: Specify:		21.	+\$	0.00
2.	Calculate your monthly e	xpenses			
	22a. Add lines 4 through 2	•		\$	1,904.00
	•	expenses for Debtor 2), if any, from Official F	form 106J-2	\$	1,00-1100
	, , ,		J 1000 L	·	4 004 00
	220. Add line 22a and 22b.	The result is your monthly expenses.		\$	1,904.00
3.	Calculate your monthly n	et income.		L	
	•	ombined monthly income) from Schedule I.	23a.	\$	1,877.16
		expenses from line 22c above.	23b.	·	1,904.00
	-SS. Sopy your monthly c	Aponeso nom ino 220 abovo.	200.		1,304.00
	23c Subtract vour month	ly expenses from your monthly income.			
		onthly net income.	23c.	\$	-26.84
	The result is vour me	, 1100 111001110.		L	
	The result is your mo				
	•	se or decrease in your expenses within the	year after you file this	form?	
4.	Do you expect an increas For example, do you expect to	se or decrease in your expenses within the finish paying for your car loan within the year or do			ase or decrease because of
1.	Do you expect an increas	finish paying for your car loan within the year or do			ase or decrease because of
<b>4</b> .	Do you expect an increas For example, do you expect to	finish paying for your car loan within the year or do			ase or decrease because of

Cill in 4h	in information to identify you				
	nis information to identify you				
Debtor 1	Charles W. Benj First Name	Amin Middle Name	Last Name		
Debtor 2		made Hame	Zaot Hamo		
(Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	EASTERN DISTRICT	OF MISSOURI		
Case nu	ımher				
(if known)					Check if this is an
					amended filing
You mus		file bankruptcy schedule	es or amended schedules	rrect information. s. Making a false statement, colin in fines up to \$250,000, or impl	
	Sign Below				
Dic	l you pay or agree to pay som	eone who is NOT an atto	orney to help you fill out	bankruptcy forms?	
•	No				
	Yes. Name of person			Attach Bankruptcy Pe	tition Preparer's Notice,
				Declaration, and Sign	ature (Official Form 119)
that	ler penalty of perjury, I declard they are true and correct. /s/ Charles W. Benjamin	e that I have read the su	x		
	Charles W. Benjamin Signature of Debtor 1		Signature of	f Debtor 2	
	Date <b>July 29, 2019</b>		Date		
	,,				

		ation to identify you								
De	btor 1	Charles W. Benj First Name	amin Middle Name	Last Name						
De	btor 2									
(Sp	ouse if, filing)	First Name	Middle Name	Last Name						
Un	ited States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	MISSOURI						
	se number				_	Check if this is an mended filing				
St Be info	as complete a	of Financial	ble. If two married people a attach a separate sheet to		ankruptcy equally responsible for sup additional pages, write you					
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1.	What is your	current marital statu	s?							
	<ul><li>☐ Married</li><li>■ Not marr</li></ul>	ried								
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	<ul> <li>■ No</li> <li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>									
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
<b>3.</b> stat					ity property state or territory co, Texas, Washington and W					
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).						
Pa	rt 2 Explain	n the Sources of You	r Income							
4.	Fill in the total	I amount of income yo	u received from all jobs and a	g a business during this yeall businesses, including partetogether, list it only once ur		ndar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$14,869.88	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Debtor 1 Charles W. Benjamin Pg 33 of 50 Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
			■ Wages, commissions, bonuses, tips			nmissions,		
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$31,000.00	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
5.	Include include and other winnings.  List each s	come regard public bene If you are fili	lless of wheth fit payments; ng a joint cas he gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a est; dividends; money collector received together, list it	alimony; child supp cted from lawsuits; only once under Do	royalties; an ebtor 1.	
				Dobton 4		Debtor 2		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	vments You	Made Before You Filed for I	Bankruptcv			
6.	□ No.	Neither Deindividual puring the No. Yes	90 days before 30 days before 40 days before 50 day	each creditor to whom you pail reditor. Do not include paymen payments to an attorney for th t on 4/01/22 and every 3 years or both have primarily consu one you filed for bankruptcy, die	d you pay any creditor a total d a total of \$6,825* or more ats for domestic support oblinis bankruptcy case. Is after that for cases filed or a total d you pay any creditor a total d a total of \$600 or more and a total of \$600 or more and d purpose.	al of \$6,825* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more?	re?  yments and the support and support an	ne total amount you nd alimony. Also, do
	Creditor'	s Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
	Marque	tte Mobile	Village	Lot rent paym of \$300 per mo		\$0.00	☐ Mortga ☐ Car ☐ Credit 0 ☐ Loan R	Card

 $\square$  Suppliers or vendors

■ Other Lot rent Payments

Debtor 1 Charles W. Benjamin

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	nyment for			
	Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209	2 vehicle payments of \$455	\$910.00	\$17,056.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other	ard payment			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost  No Yes. List all payments to an insider Insider's Name and Address		ments or transfer a  Total amount	any property on a		ebt that benefited an			
	moradi di Nama Anadi da	Dates of paymont	paid	still owe	Include cred				
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures							
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.								
	Yes. Fill in the details.  Case title  Case number	Nature of the case	Court or agency		Status of th	ne case			
10.	<ul> <li>Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.</li> <li>No. Go to line 11.</li> <li>Yes. Fill in the information below.</li> </ul>								
	Creditor Name and Address	Describe the Property		Date		Value of the property			
		Explain what happened							
<ul> <li>Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts for accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>									
	Creditor Name and Address	Describe the action the creditor took			Date action was Amount taken				
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes		erty in the possessi	ion of an assigne	e for the bene	efit of creditors, a			

Debtor 1 Charles W. Benjamin Pg 35 of 50 Case number (if known)

Par	t 5: List Certain Gifts and Contribution	s						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No							
	Yes. Fill in the details for each gift or co							
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Par	t 7: List Certain Payments or Transfers	3						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or p	ptcy, die	d you or anyone else acting on your behalf pay on gar bankruptcy petition?  s, or credit counseling agencies for services require		ty to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Westbrook Law Group LLC 515 Jefferson St. Suite C Saint Charles, MO 63301 brent@westbrooklawgroup.com Steve Benjamin (father)		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
			Attorney Fees; \$1,165; \$335 for the Court Filing Fee	7/23/19	\$1,500.00			
	Debtorcc Inc. www.debtorcc.org		\$14.95 for pre-bankruptcy credit counseling services	7/29/19	\$14.95			

Case number (if known)

Debtor 1 Charles W. Benjamin

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.						
	■ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and v transferred	alue of any prope	erty	Date payment or transfer was made	Amount of payment	
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No						
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made	
	Person's relationship to you						
	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.						
	Name of trust	Description and v	and value of the property transferred			Date Transfer was	
	Name of trust Description and value of the property transferred				eu	made	
Par	8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	age Units			
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo mo	te account was esed, sold, eved, or nsferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)			contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility	Who else has or h	nad access D	escribe the	contents	Do you still	
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S	treet, City,			have it?	

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Debtor 1 Charles W. Benjamin

Case number (if known)

Par	t 9: Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
_	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	— ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, opera	te, or utilize it or used			
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, to	xic substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	n they occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an enviro	nmental law?			
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	y of the following connections to	any business?			
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership		-				
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or	equity securities of a corporation					

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Del	otor 1 Charles W. Benjamin	Py 38 01 50	Case number (if known)
	■ No. None of the above applies. Go to I	Part 12.	
	☐ Yes. Check all that apply above and fill	I in the details below for each business	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Include all financial
	■ No		
	Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pai	t 12: Sign Below		
are with		false statement, concealing property,	d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both.
/s/	Charles W. Benjamin		
	arles W. Benjamin Inature of Debtor 1	Signature of Debtor 2	
Da	te July 29, 2019	Date	
Did	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	mation to identify your	case:		
Debtor 1	Charles W. Benja	min		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF MISSOURI	
	. ,			
Case number (if known)				☐ Check if this is an amended filing
	nt of Intentio		viduals Filing Under Chapt	er 7 12/15
	ividual filing under cha e claims secured by yo		I out this form if:	
you have leas You must file thi	sed personal property a is form with the court w ever is earlier, unless th	nd the lease has n	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to tl	set for the meeting of creditors, he creditors and lessors you list
	eople are filing together nd date the form.	r in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1 For any credit	ors that you listed in Pa	art 1 of Schedule D	e: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information be			What do you intend to do with the property that secures a debt?	
Creditor's B	Bridgecrest		■ Surrender the property.	□No
name:	J		Retain the property and redeem it.	
Description of	2013 Ford Fusion	70 YYY miles	☐ Retain the property and enter into a	■ Yes
property	2013 1 010 1 051011	73,XXX IIIIes	Reaffirmation Agreement.  Retain the property and [explain]:	
securing debt:				
Part 2: List Yo	our Unexpired Persona	l Property I eases		
For any unexpire in the informatio	ed personal property le on below. Do not list rea	ase that you listed Il estate leases. Un	in Schedule G: Executory Contracts and Unexpinexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				П Ni
Description of lea	ased			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
				<b>-</b> 100
Lessor's name:				□ No
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7	page 1

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Debtor 1 Charles W. Benjamin	Case number (if known)
Description of leased	E v
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	y property of my estate that secures a debt and any personal
X /s/ Charles W. Benjamin X	
- · · · · · · · · · · · · · · · · · · ·	nature of Debtor 2
Signature of Debtor 1	
Date <b>July 29, 2019</b> Date	

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Fill in	his information to identify your case:		Ch	eck one box	only as d	irected in this form and	I in Form
Debto	Charles W. Benjamin		12	2A-1Supp:			
Debto	r 2			■ 1 Thoro	e no proc	umption of abuse	
(Spouse	, if filing)				·	•	
United	States Bankruptcy Court for the: Eastern District of	Missouri				o determine if a presur nade under <i>Chapter 7</i>	
Case	number					cial Form 122A-2).	
(if know	n)					does not apply now be service but it could ap	
				☐ Check if	this is a	n amended filing	
Offic	<u>cial Form 122A - 1</u>						
Cha	pter 7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/15
attach a case ni	omplete and accurate as possible. If two married people as separate sheet to this form. Include the line number to with the line number to with the line number to with the line number of the line of	vhich the additior m a presumption	nal information a of abuse becau	applies. On the	e top of a	ny additional pages, write narily consumer debts o	e your name and r because of
1. <b>V</b>	What is your marital and filing status? Check one or	 าly.					
ı	Not married. Fill out Column A, lines 2-11.						
[	Married and your spouse is filing with you. Fill ou	ut both Columns	A and B, lines	2-11.			
[	☐ Married and your spouse is NOT filing with you.	You and your s	spouse are:				
	☐ Living in the same household and are not lega	ally separated.	Fill out both Co	lumns A and	B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated	d under nonbar	kruptcy law	that applie	es or that you and your	
101 the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that property.	nonth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh August 31 de any income	. If the amo amount m	ount of your monthly incon ore than once. For examp	ne varied during le, if both
- 5,72	, , , , , , , , , , , , , , , , , , , ,			Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, ayroll deductions).	and commission	ons (before all	\$ 2,	136.31	\$	
	<b>limony and maintenance payments.</b> Do not include column B is filled in.	payments from	a spouse if	\$	0.00	\$	
fi a	all amounts from any source which are regularly part you or your dependents, including child support om an unmarried partner, members of your household not roommates. Include regular contributions from a spalled in. Do not include payments you listed on line 3.	<ul> <li>Include regular</li> <li>your depender</li> </ul>	contributions nts, parents,	\$	0.00	\$	
5. <b>N</b>	let income from operating a business, profession,						
		\$ 0.00	otor 1				
	Gross receipts (before all deductions)	-\$ 0.00					
	Ordinary and necessary operating expenses let monthly income from a business, profession, or far		Copy here ->	\$	0.00	\$	
	let income from rental and other real property	Ψ	.,	·			
		Deb	otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	0	•	0.00	Φ.	
\ \ \	let monthly income from rental or other real property	\$	Copy here ->		0.00	\$	
7. <b>l</b> i	nterest, dividends, and royalties			\$	0.00	Ψ	

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Debtor 1 Charles W. Benjamin Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a bene	fit under				
	For you For your spouse	\$O	.00				
_		·					
	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paymer umanity, or internationa a separate page and p	nts I or	\$	0.00	\$	
	•			\$	0.00	\$	
	Total amounts from separate pages, if any.			\$	0.00	\$	
			_	<u> </u>	0.00		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$	2,136.31	+ \$ _		= \$2,136.31
							Total current monthly income
Part	2: Determine Whether the Means Test Applies	to You					moome
12.	Calculate your current monthly income for the yea	r. Follow these steps:					
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	nere=>	\$
	Multiply by 12 (the number of months in a year)						<b>x</b> 12
	12b. The result is your annual income for this part of the	ne form				12b.	\$25,635.72_
13.	Calculate the median family income that applies to	you. Follow these ste	os:				
	Fill in the state in which you live.	МО					
	Fill in the number of people in your household.	1					
	Fill in the median family income for your state and size					13.	\$48,276.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban		pecified	in the separa	te instruc	tions	
14.	How do the lines compare?						
	<ul><li>Line 12b is less than or equal to line 13. Go to Part 3.</li></ul>	On the top of page 1, cl	neck box	1, There is n	o presum	ption of abuse	Э.
	14b.	of page 1, check box 2	, The pr	esumption of	abuse is	determined by	Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjur	y that the information o	n this sta	atement and i	n any atta	achments is tru	ue and correct.
	χ /s/ Charles W. Benjamin						
	Charles W. Benjamin Signature of Debtor 1						
	Date <b>July 29, 2019</b>						
	MM / DD / YYYY  If you checked line 14a, do NOT fill out or file For	m 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and						
	ii you diledked lille 140, lill out Follii 122A-2 allu	me it with this lotti.					

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-44710 Doc 1 Filed 07/29/19 Entered 07/29/19 18:48:19 Main Document Pg 47 of 50

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Eastern District of Missouri

In re	Charles W. Benjamin		Case No			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR D	DEBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy	, or agreed to be pai	d to me, for services rendered or to		
	For legal services, I have agreed to accept		s	1,165.00		
	Prior to the filing of this statement I have receive	d	\$	1,165.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are me	mbers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the i					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul><li>a. Analysis of the debtor's financial situation, and rer</li><li>b. Preparation and filing of any petition, schedules, s</li><li>c. Representation of the debtor at the meeting of cred</li><li>d. [Other provisions as needed]</li></ul>	tatement of affairs and plan which	n may be required;			
6.	By agreement with the debtor(s), the above-disclosed Appellate matters and adversary proc		g service:			
		CERTIFICATION				
	I certify that the foregoing is a complete statement of pankruptcy proceeding.	any agreement or arrangement for	r payment to me for	representation of the debtor(s) in		
J	uly 29, 2019	/s/ Brent S. West	brook			
	Pate	Brent S. Westbro				
		Signature of Attorne Westbrook Law (				
		515 Jefferson St.				
		Suite C Saint Charles, M	O 63301			
		636-493-9231 Fa				
		brent@westbroo				
		Name of law firm				

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### United States Bankruptcy Court Eastern District of Missouri

In re	Charles W. Benjamin		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATI	ON OF CREDITOR I	MATRIX	
contai compl	The above named debtor(s) hereby certining the names and addresses of my cred lete.	•		
		/s/ Charles W. Benja	amin	
		Charles W. Benjami		
		Debtor		
		Dated: July 29. 2	2019	

Account Resolution Corp Attn: Bankruptcy Po Box 3860 Chesterfield, MO 63006

BJC Healthcare PO Box 958410 Saint Louis, MO 63195

Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209

Busey Bank 1928 Zumbehl Rd. Saint Charles, MO 63303

Commerce Bank Credit Recovery Dispute Rep PO Box 419248 Mailstop: KCREC-10 Kansas City, MO 64141

Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

IC System Inc. PO Box 64378 Saint Paul, MN 55164

Jefferson Capital Systems, LLC Po Box 1999 Saint Cloud, MN 56302

Lincoln County Justice Center 45 Business Park Drive Troy, MO 63379

Mattress Firm 2931 Veterans Memorial Pkwy Saint Charles, MO 63303

Medicredit Inc. Attn: Bankruptcy Department Po Box 1629 Maryland Heights, MO 63043

Progressive Leasing 256 West Data Drive Draper, UT 84020

Radiologic Imaging Consultants 220 Compass Point Dr. Saint Charles, MO 63301

Regions Bank 1900 Fifth Avenue North Birmingham, AL 35203

SSM Health St. Joseph Hospital 300 1st Capitol Dr. Saint Charles, MO 63301

Verizon Wireless PO Box 660108 Dallas, TX 75266